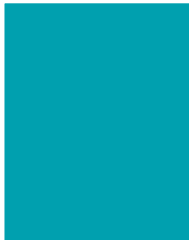


Florida Department of Health
in Walton County

Strategic Plan
Calendar Year 2019-2021



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Governor

Vacant
State Surgeon General
Secretary of Health

Vacant
Deputy Secretary of County Health Systems

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Executive Summary

The Florida Department of Health in Walton County (DOH-Walton) and the Walton Community Health Center (WCHC) conducted a strategic planning process during the Summer and Fall of 2018 to define the direction and course of the county health department for consumers, employees, administrators and legislators for the next three years. The plan will position DOH-Walton to operate as a sustainable part of Florida's integrated public health system and provide residents and visitors with quality public health services. It is a living document that DOH-Walton will evaluate and update regularly to address new challenges posed by the changing public health environment in Walton County.

Executive leadership championed the six-month planning process and included numerous internal stakeholders including supervisors, program leads and front-line staff. DOH-Walton also engaged in discussion with key external stakeholders and community partners. DOH-Walton considered key support functions required for efficiency and effectiveness and sought to articulate what it plans to achieve as an organization, the actions it will take and how it will measure success.

DOH-Walton approached the strategic planning process with a number of guiding principles in mind.

- Children, adults and families are at the center of public health activities.
- Individuals, families, businesses, schools, civic organizations, faith-based groups and local government are responsible for child, adult, family and community health.
- Social determinants dominate health outcomes.
- Health equity promotion is part of every public health activity.
- Interventions to promote public health are evidence-based and supported by the community.
- Veterans particularly deserve support.

Strategic Plan Progress Review and Revision

The DOH-Walton Performance Management Council (PMC), comprised of executive leadership, management and program leads, monitors DOH-Walton's progress in achieving its strategic objectives and addresses areas for improvement on a quarterly and annual basis. The lead program or position for each objective provides updates on objectives that are not on track at the quarterly reviews; during annual reviews, the leads report progress and status for all objectives completed, on track and not on track. Based on the reviews, the DOH-Walton PMC has the opportunity to revise strategic plan objectives.

Mission, Vision and Values

Mission – Why do we exist?

To protect, promote and improve the health of all people in Florida through integrated state, county and community efforts.

Vision – What do we want to achieve?

To be the Healthiest State in the Nation.

Values – What do we use to achieve our mission and vision?

Innovation: We search for creative solutions and manage resources wisely.

Collaboration: We use teamwork to achieve common goals & solve problems.

Accountability: We perform with integrity & respect.

Responsiveness: We achieve our mission by serving our customers & engaging our partners.

Excellence: We promote quality outcomes through learning & continuous performance improvement.

Strategic Priorities

STRATEGY MAP

STRATEGIC PRIORITY AREAS AND GOALS	STRATEGIES	OBJECTIVES
1. HEALTH EQUITY GOAL 1.1 Ensure Walton County residents in all communities will have opportunities to achieve healthier outcomes	1.1.1 Eliminate health gaps between different communities 1.1.2 Adopt a system of ongoing capacity building on health equity	1.1.1A By December 31, 2019, establish 15 new partners and enhance existing partnerships collaborating with health community partners to address the social determinants of health.
		1.1.2A By December 31, 2020, the number of DOH-Walton employees who completed <i>Cultural Awareness: Introduction to Organizational Cultural Competence and Addressing Health Equity: A Public Health Essential</i> online trainings will increase from 0% (2018) to 50% (2020).
		1.1.2B By June 30, 2019, establish baseline data that shows the diversity of the current workforce to include race, ethnicity, gender, and educational attainment.
		1.1.2C By June 30, 2020, assess and promote the inclusion of the Social Determinants of Health in 100% community health improvement plans.
		1.1.2D By June 30, 2021, increase the percentage of CHD family planning clients served who have documentation of race in their records from 93.1% (2017) to 95% (2021).
		1.1.2E By June 30, 2019, assess current social determinant of health data collected from clients through Clinical Service and determine the three most prevalent health equity issues within client population.
		1.1.2F By June 30, 2020, establish case management guidelines to address the three most prevalent issues affecting social determinants of health within client population.
2. LONG, HEALTHY LIFE GOAL 2.1 Increase healthy life expectancy, including the reduction of health disparities to improve the health of all groups	2.1.1 Promote an age-friendly community 2.1.2 Reduce prevalence of chronic diseases 2.1.3 Improve mental health 2.1.4 Reduce injury and improve infant mortality 2.1.5 Increase vaccination rates for children, teens, and adults 2.1.6 Reduce incidence of sexually transmitted diseases 2.1.7 Promote the adoption of effective or higher method of birth control	2.1.1A By June 30, 2020, establish five partnerships for developing and implementing a community health improvement plan to address the identified gaps affecting older adults.
		2.1.2A By June 30, 2020, meet CDC requirements to move the Diabetes Prevention Program from pending status to preliminary recognition.
		2.1.2B Annually, complete 100% of requirements for Healthiest Weight Florida reporting.
		2.1.2C By December 31, 2021, increase the percentage of Adult Comprehensive Care patients age 51 to 74 years old seen during the calendar year who had appropriate screening for colorectal cancer from 39% (2018) to 50% (2021).
		2.1.3A Annually, present on a mental health topic at one community outreach event or meeting.
		2.1.4A By December 31, 2019, conduct a car seat safety class quarterly targeted to new and expecting parents.
		2.1.5A By December 31, 2021, increase the percent of two-year-olds who are fully immunized from 85.9% (2017) to 90%.
		2.1.5B By December 31, 2021, increase number of HPV vaccines administered annually from 658 (2018) to 800 (2021).
		2.1.5C By December 31, 2019, increase number of hepatitis A vaccines administered annually from 970 (2018) to 1200 (2019).
		2.1.6A By December 31, 2021, ensure 50% clients receiving a HIV test are counselled on PrEP.
		2.1.6B By December 31, 2019, conduct a class quarterly at the Walton County Jail focusing on women's health and sexually transmitted disease prevention to link at-risk women to services.
		2.1.7A By June 30, 2021, increase the percentage of CHD family planning clients who adopt an effective or higher method of birth control from 78.2% (2017) to 80% (2021).

Strategic Priorities

STRATEGY MAP CONTINUED

3. READINESS FOR EMERGING HEALTH THREATS GOAL 3.1 Demonstrate readiness for emerging health threats	3.1.1 Reduce incidence of infectious diseases	3.1.1A By December 31, 2021, establish seven partnerships to target food safety prevention measures to reduce reported cases of enteric diseases.
	3.1.2 Improve public health preparedness planning	3.1.2A By December 31, 2020, establish and implement a program to guide public health preparedness efforts for the access and functional needs population.
	3.1.3 Promote tobacco-free environments	3.1.2B By December 31, 2021, have 100% of staff complete supplemental training for emergency response duties.
	3.1.4 Decrease the number of pets without current rabies vaccination	3.1.3A Annually, increase the number of community employers who adopt a tobacco-free worksite policy by one in collaboration with the Walton County Prevention Coalition.
		3.1.4A By December 31, 2019, work with community partners to establish two documented procedures to educate the community about the risks of the rabies virus.
4. EFFECTIVE AGENCY PROCESSES GOAL 4.1 Establish a sustainable infrastructure, which includes a competent workforce, standardized business practices and effective use of technology	4.1.1 Produce a workforce development plan	4.1.1A By June 30, 2019, create and implement a workforce development plan that contains the necessary requirements from the Public Health Accreditation Board listed in Standards 8.1 and 8.2.
	4.1.2 Improve system for internal and external communications	4.1.1B By June 30, 2019, define and implement a new employee orientation process to ensure comprehensive onboarding.
	4.1.3 Establish marketing budget process	4.1.2A By December 31, 2019, define and implement an internal communications process for coordinated dissemination of information.
	4.1.4 Increase capacity to apply for supplemental funding	4.1.2B By December 31, 2019, define and implement an external communications process for coordinated dissemination of information
		4.1.3A By March 2020, have 100% of programs submit a marketing budget allocation form for Fiscal Year 2020-2021.
		4.1.4A By December 2020, define internal process that streamlines applying for potential supplemental funding and grants.
5. GOVERNANCE GOAL 5.1 Ensure sustainability for the board of directors	5.1.1 Maintain membership requirements for the board of directors	5.1.1A By December 31, 2019, increase membership of the Walton Community Health Center Board of Directors from 9 to 12.
	5.1.2 Establish a credentialing process for providers	5.1.2A By December 31, 2019, the Walton Community Health Center Board of Directors will establish a policy for credentialing in alignment with the HRSA guidelines.

Strategic Priorities



Priority 1: Health Equity

Goal 1.1 Ensure Walton County residents have opportunities to achieve




Strategy	Objective
1.1.1 Eliminate health gaps between different communities 	<p>A. By December 31, 2019, establish 15 new partners and enhance existing partnerships collaborating with health community partners to address the social determinants of health.</p> <p>Lead: Community Health Improvement Planner</p>
1.1.2 Adopt a system of ongoing capacity building on health equity 	<p>A. By December 31, 2020, the number of DOH-Walton employees who completed Cultural Awareness: Introduction to Organizational Cultural Competence and Addressing Health Equity: A Public Health Essential online trainings will increase from 0% (2018) to 50% (2020).</p> <p>Lead: Performance Management Lead</p>
	<p>B. By June 30, 2019, establish baseline data that shows the diversity of the current workforce to include race, ethnicity, gender, and educational attainment.</p> <p>Lead: Performance Management/Human Resources Liaison</p>
	<p>C. By June 30, 2020, assess and promote the inclusion of the social determinants of health in 100% community health improvement plans.</p> <p>Lead: Community Health Improvement Planner</p>
	<p>D. By June 30, 2021, increase the percentage of CHD family planning clients served who have documentation of race in their records from 93.1% (2017) to 95% (2021).</p> <p>Lead: Practice Manager</p>
	<p>E. By June 30, 2019, assess current social determinant of health data collected from clients through Clinical Service and determine the three most prevalent health equity issues within client population.</p> <p>Lead: Practice Manager</p>
	<p>F. By June 30, 2020, establish case management guidelines to address the three most prevalent issues affecting social determinants of health within client population.</p> <p>Lead: Case Manager</p>


Symbol and teal shading indicate that the strategy/objective is one of the seven agency priorities.



Priority 2: Long, Healthy Life

Goal 2.1 Increase healthy life expectancy, including the reduction of health disparities to improve the health of all groups.

Strategy	Objective
2.1.1 Promote an age-friendly community 	A. By June 30, 2020, establish five partnerships for developing and implementing a community health improvement plan to address the identified gaps affecting older adults. Lead: Community Health Improvement Planner
2.1.2 Reduce prevalence of chronic diseases	A. By June 30, 2020, meet CDC requirements to move the Diabetes Prevention Program from pending status to preliminary recognition. Lead: Senior Community Health Nurse/DPP Lead
	B. Annually, complete 100% of requirements for Healthiest Weight Florida reporting. Lead: Healthiest Weight Florida Coordinator
	C. By December 31, 2021, increase the percentage of Adult Comprehensive Care patients age 51 to 74 years old seen during the calendar year who had appropriate screening for colorectal cancer from 39 (2018) to 50% (2021). Lead: Clinical Services ARNP
2.1.3 Improve mental health	A. Annually, present on a mental health topic at one community outreach event or meeting. Lead: Behavioral Specialist
2.1.4 Reduce injury and improve infant mortality 	A. By December 31, 2019, conduct a car seat safety class quarterly targeted to new and expecting parents. Lead: Healthy Start Supervisor
2.1.5 Increase vaccination rates for children, teens and adults 	A. By December 31, 2021, increase the percent of two-year-olds who are fully immunized from 85.9% (2017) to 90% (2021). Lead: Director of Nursing
	B. By December 31, 2021, increase number of HPV vaccines administered annually from 658 (2018) to 800 (2021). Lead: Clinical Supervisor
	C. By December 31, 2019, increase number of hepatitis A vaccines administered annually from 970 (2018) to 1200 (2019). Lead: Clinical Supervisor


<p>2.1.6 Reduce incidence of sexually transmitted diseases</p> 	<p>A. By December 31, 2021, ensure 50% clients receiving a HIV test are counselled on PrEP.</p> <p>Lead: Director of Nursing</p> <p>B. By December 31, 2019, conduct a class quarterly at the Walton County Jail focusing on women's health and sexually transmitted disease prevention to link at-risk women to services.</p> <p>Lead: Director of Nursing</p>
<p>2.1.7 Promote the adoption of effective or higher method of birth control</p>	<p>A. By June 30, 2021, increase the percentage of CHD family planning clients who adopt an effective or higher method of birth control from 78.2% (2017) to 80% (2021).</p> <p>Lead: Family Planning Provider</p>

Symbol and teal shading indicate that the strategy/objective is one of the seven Florida Health Performs priorities.



Priority 3: Readiness for Emerging Health Threats

Goal 3.1 Demonstrate readiness for emerging health threats.

Strategy	Objective
<p>3.1.1 Reduce incidence of infectious diseases</p>	<p>A. By December 31, 2021, establish seven partnerships to target prevention measures to reduce reported cases of enteric diseases.</p> <p>Lead: Environmental Manager</p>
<p>3.1.2 Improve public health preparedness planning</p>	<p>A. By December 31, 2020, establish and implement a program to guide public health preparedness efforts for the access and functional needs population.</p> <p>Lead: Public Health Preparedness Planner</p> <p>B. By December 31, 2021, have 100% of staff complete supplemental training for emergency response duties.</p> <p>Lead: Public Health Preparedness Planner</p>
<p>3.1.3 Promote tobacco-free environments</p> 	<p>A. Annually, increase the number of community employers who adopt a tobacco-free worksite policy by one in collaboration with the Walton County Prevention Coalition.</p> <p>Lead: Community Health Improvement Planner</p>
<p>3.1.4 Decrease the number of pets without current rabies vaccination</p>	<p>A. By December 31, 2019, work with community partners to establish two documented procedures to educate the community about the risks of the rabies virus.</p> <p>Lead: Environmental Manager</p>

Symbol and teal shading indicate that the strategy/objective is one of the seven Florida Health Performs priorities.



Priority 4: Effective Agency Processes

Goal 4.1 Establish a sustainable infrastructure, which includes a competent workforce, standardized business practices and effective use of technology

Strategy	Objective
4.1.1 Produce a workforce development plan	A. By June 30, 2019, create and implement a workforce development plan that contains the necessary requirements from the Public Health Accreditation Board listed in Standards 8.1 and 8.2. Lead: Operations Manager
	B. By June 30, 2019, define and implement a new employee orientation process to ensure comprehensive onboarding. Lead: Operations Manager/Human Resources Liaison
4.1.2 Improve system for internal and external communications	A. By December 31, 2019, define and implement an internal communications process for coordinated dissemination of information. Lead: Public Information Officer
	B. By December 31, 2019, define and implement an external communications process for coordinated dissemination of information. Lead: Marketing Lead
4.1.3 Establish marketing budget process	A. By March 2020, have 100% of programs submit a marketing budget allocation form for Fiscal Year 2020-2021. Lead: Operations Manager/Marketing Lead
4.1.4 Increase capacity to apply for supplemental funding	A. By December 2020, define internal process that streamlines applying for potential supplemental funding and grants. Lead: Business Office Manager/Grant Writer

Symbol and teal shading indicate that the strategy/objective is one of the seven Florida Health Performs priorities.



Priority 5: Governance

Goal 5.1 Ensure sustainability for the board of directors

Strategy	Objective
1. Maintain membership requirements for board of directors	A. By December 31, 2019, increase membership of the Walton Community Health Center Board of Directors from 9 to 12. Lead: WCHC Board of Directors
2. Establish a credentialing process for providers	A. By December 31, 2019, the Walton Community Health Center Board of Directors will establish a policy for credentialing in alignment with the HRSA guidelines. Lead: WCHC CEO/CFO

Symbol and teal shading indicate that the strategy/objective is one of the seven Florida Health Performs priorities.

Appendix A

Strategic Planning Participants

2018

Executive Leadership

Holly Holt
Administrator/Health Officer

Venita Morell
Medical Director

Harriet Simmons
Operations Manager

Kathryn Barley
Nursing Director

Jamie Carmichael
Business Manager

John Ottesen
Dental Director

Crystal Steele
Environmental Manager

Theresa Carroll
Systems Administrator

Victoria Cuchens
WIC Director

Management Team

Lisa Holley
Practice Manager

Denis Flynn
Billing Supervisor

Nichole Ray
Nursing Supervisor

Doris Bontrager
Nursing Supervisor

Peggy Gill
Healthy Start Supervisor

Shirley Guillory
Advanced Registered Nurse
Practitioner

Kim Permenter
Clerical Supervisor

Program Leads

Patricia Roberts
Public Information Officer

Brandi Gill
Community Planner

Tom Smith
Public Health Preparedness
Planner

Missy Roberts
Epidemiology Nurse

Sarah Senterfitt
Human Resources Liaison

Kayrn Bielski
Senior Community Health
Nurse

Jennifer Jordan
Senior Community Health
Nurse

Jane Davis
Behavioral Specialist

Jamie Todd
Senior Community Health
Nurse

Charylene Godwin
Environmental Specialist III

Front-Line Staff

Marissa Smith
Environmental Health
Specialist

Diane Cuchens
Office Automations Specialist

Tammy Paridon
Operations Analyst I

Lilly Cruz
Senior Clerk

Patricia Hall
Senior Clerk

Amy Selden
Senior Clerk

Maritza Campbell
Senior Clerk

Sherry Adams
RN Case Manager

Kristin Alford
Immunization Nurse

Debbie Rockman
Dietetic Technician

Community Stakeholders

Tamara Bogle
Mental Health
Walton County Sheriff's Office

Kristen Rodriguez
Bureau Chief
Walton County Sheriff's Office

Jan Lowery
Member of the Board of Directors
Walton Community Health Center

Tom Baker
Director
Walton County HUD

Ardelle Bush
Executive Director
Healthy Start Coalition of Okaloosa and
Walton Counties

Wyndy Crozier
Director
Emerald Coast Technical College

Tracie Moorer
Care Coordinator
Big Bend Community Based Care

Judea Kring
Coordinator
Walton County Prevention Coalition

Amariles Rosado
Director, Community Impact and Investments
United Way of Okaloosa and Walton Counties

Bryan Callahan
Coordinator
Walton County Prevention Coalition

Kimberly Simpson
Coordinator
Walton County HUD

Gwen Rhodes
Resource Specialist
Area Agency on Aging

Nicholas Ramos
Member of the Board of Directors
Walton Community Health Center

Appendix B

Planning Summary

The Florida Department of Health in Walton County (DOH-Walton) Performance Management Council (PMC) oversaw the development of the Strategic Plan. DOH-Walton PMC developed the timeline and framework for the plan and aligned with the Department's current mission, vision and values. Staff conducted an environmental scan of the county health department and community (sources listed in Appendix E), and DOH-Walton PMC reviewed the environmental scan, the previous strategic plan, and other local and state plans with an array of staff members and community stakeholders to determine strategic priority areas.

DOH-Walton staff presented the environmental scan analysis to program leads, supervisors, and community partners who reviewed the findings and participated in a facilitated discussion to identify strengths, weaknesses, opportunities and threats (SWOT). In addition to the facilitated discussion, a tactful survey was designed to garner input from all staff to ensure all employees had the opportunity to participate. Findings from the discussion and survey highlighted a couple broad categories: workforce development, community partnerships, communications, programs and services, budget. DOH-Walton PMC then used the SWOT analysis (Appendix C), environmental scan and the agency mission, vision and values to develop the goals and strategies for the DOH-Walton Strategic Plan 2019-2021.

After deliberation and discussion, the DOH-Walton PMC finalized the strategic priority areas:

- Health Equity
- Long, Healthy Life
- Readiness for Emerging Health Threats
- Effective Agency Processes
- Governance

During workgroup meetings with staff from various levels of DOH-Walton, attendees provided input and feedback on the goals and developed strategies and measurable objectives. Facilitators worked with program managers and their staff to review and verify the strategies and objectives for each priority area. The revised proposal was routed back to the DOH-Walton PMC for comment and approval.

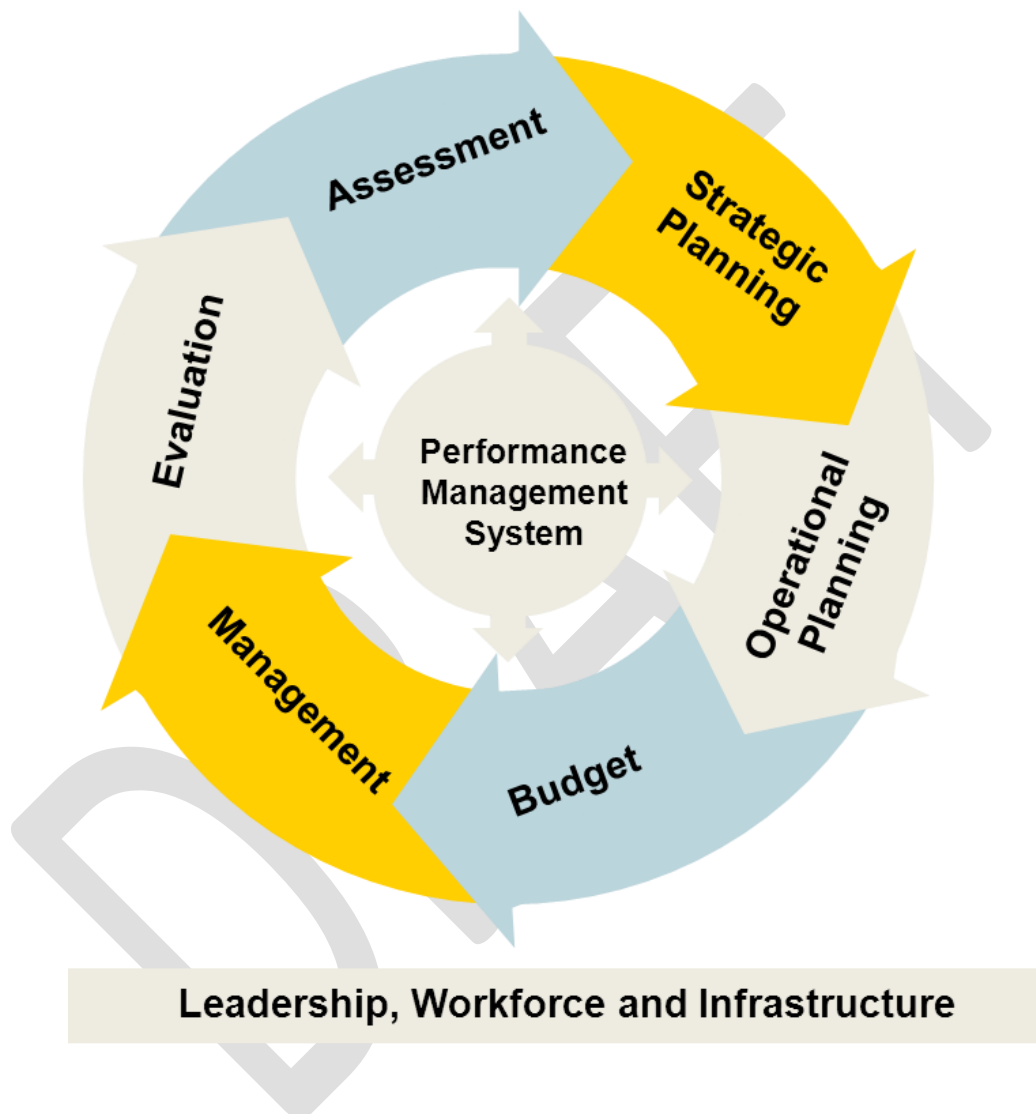
The following is the schedule of meetings for the DOH-Walton Strategic Plan 2019-2021:

DATE	MEETING TOPIC	ATTENDEES
June 25, 2018	Establish timeline; discuss mission, vision and values.	PMC Members
September 14, 2018	Review environmental scan, complete SWOT analysis, and discuss possible strategic priority areas.	Executive leadership, management team, program leads, and community stakeholders
September 24, 2018	SWOT Review	PMC Members
November 15, 2018	SWOT Review, define strategic priority areas, determine timeline to develop goals and strategies.	PMC Members
December 10, 2018	Review preliminary goals and strategies from workgroups	PMC Members
January 28, 2019	Review, discuss and approve final draft of the DOH-Walton Strategic Plan, 2019-2021	PMC Members

Monitoring Summary

As shown in the figure on the next page, strategic planning is a key component of the larger performance management system. This performance management system is the cornerstone of the DOH-Walton's organizational culture of accountability and performance excellence. The DOH-Walton Performance Management Council (PMC) consists of the County Health Department Administrator and Health Officer, the executive leadership team and four program leads. The DOH-Walton PMC is responsible for measuring, monitoring and reporting progress on the goals and objectives of the local Strategic Plan, Community Health Improvement Plan, Quality Improvement Plan and Workforce Development Plan, as well as general performance management. The DOH-Walton PMC meets twice quarterly to advise and guide the creation, deployment and continuous evaluation of the DOH-Walton performance management system and its components. Each objective has been assigned to a member of the DOH-Walton PMC or program lead for implementation. The DOH-Walton PMC reviews quarterly agency strategic plan tracking reports for progress toward goals. Annually, the DOH-Walton PMC will approve a local strategic plan progress report, assessing progress toward reaching goals, objectives and achievements for the year. The DOH-Walton Strategic Plan will be reviewed by March each year, based on an assessment of availability of resources, data, community readiness, the current progress and the alignment of goals.

Figure 1: The DOH-Walton Performance Management System



Appendix C

Strengths, Weaknesses, Opportunities and Threats

Conducted September-October 2018

Strengths

- Community partnerships are active and fruitful with local health initiatives.
- Engaged partners with the Walton Community Health Improvement Partnership.
- Access to additional grant opportunities due to being a co-applicant with the Walton Community Health Center.
- Robust ESF-8 and Public Health Preparedness infrastructure with continuous planning activities and routine exercises to determine areas of improvement.
- Established and on-going community education programs for chronic disease prevention.
- Prenatal care services offered to the public.
- Leadership fosters a working environment of collaboration and teamwork.
- Competent medical and dental providers offering patient-centered care.
- Knowledgeable, experienced and empathetic leadership willing to understand the needs of the workforce.
- Federally Qualified Health Center integration benefits availability of multiple services to make community healthier.
- Dedicated, faithful, caring and competent staff motivated to carry out the mission, vision, and values of the agency.
- Expanded hours of operation, walk-in appointments for specific clinical services, satellite clinics help ensure the public has access to patient-center health care.
- Availability of Language Line for translation services.
- Having the ability to refer clients for services that DOH-Walton does not provide.
- Availability of trainings to develop skills and expand knowledge.
- Strong relationships with other CHDs in region to work on overarching issues.
- An increasing percentage of WIC infants ever breastfed.
- Growing number of daycares and early childcare centers participating in chronic disease prevention education.
- Comprehensive STD prevention classes in schools.

Weaknesses

- Lack of proper use of community partners to promote services
- Inadequate clinical electronic health record (HMS), band-width and appointment system.
- Inconsistent organization and use of the J Drive.
- Lack of workforce or leadership development process or system to help develop applicable skills and reward growth.
- Insufficient process of internal communication and sharing of resources to ensure all levels of staff have needed information to not duplicate work and efforts.
- Lack of proper planning and evaluation of all health education and promotion programs.
- Poor use of committees as a leadership development opportunity.
- Disjointed communications split between two positions with no structure or continuous oversight for coordination.
- Need for more job-specific guidance and training for new employee orientation.
- Rate of pay is not competitive.
- Inefficiencies with CHD Leadership; specifically regarding unbiased management, understanding of processes and practices, succession planning etc.
- Lack of focus on aging population when planning health programs and interventions.
- Limited allocation of general revenue to support public health community initiatives.
- Lack of mental health education and programs for the community.
- Lack of succession planning, career ladders, advancement and leadership opportunities.
- Barriers to use of mass communication methods to reach both the general population and vulnerable populations due to limitations to social media and other emerging technologies.
- Lack of sufficient employee recognition based on employee satisfaction survey.
- Limited staff able to speak a second language.
- Lack of agency program standardization from Central Office.
- Continuously unable to meet the state goal for the percent of 2-year-old clients fully immunized.
- Lack of translation and health education planning protocol and procedure when targeting individuals with a primary language other than English (ie. nutritional and oral health education to Hispanic population).
- Limited staff knowledge of health equity and how to identify and address health disparities.
- Competing organizational focus between public health and primary care.

Opportunities

- Possibility of a formalized network to allow "smooth" transition of services from one agency to another (ie. inmate releases).
- Public unawareness of the importance of routine services for males utilizing partners.
- Increasing participation among community partners and ability to increase interagency communication.
- Increasing national, state and local focus on mental health with increase funding for community resources for prevention and intervention.
- Robust religious community that could be leveraged to build educational awareness for parents of children, specifically families of different racial or ethnic backgrounds.
- Ability to leverage area volunteer programs to increase civil participation in the community.
- Ability to increase local community leaders' and partners' awareness of health equity and the social determinants of health.
- Ability to change local public perception that the health department is just for "shots and birth control" and that we do not have "real" doctors.
- Increasing community focus on stigmatized public health issues such as mental health, substance use, and HIV leads to opportunities to break stigmas and have conversations.
- Telehealth services are increasing in popularity, which could help with access to care needs.
- Local government has a focus on bettering economic development opportunities to drive community growth.
- Possibility to build collaborative partnerships with agencies to address domestic violence.
- Increasing focus in the field of public health on minority health and health equity.
- Increasing awareness to countering violent extremism, a national threat that has strong roots in the healthcare field.
- Increasing emphasis on disease prevention and healthy living including diet, exercise and mental health.
- Integrated community effort from local partnerships to provide needed community services outside of normal operations. (ie. the Animal Bite Control Committee and the low-cost rabies clinic).
- More focus on addressing issues such as the homeless, poverty, and older adults in the community.

Threats





- Change in state, agency, and local leadership could impact CHD operations and focuses.
- Increasing population and global travel offers more possibility of environmental issues and communicable disease spread.
- Uncontrollable managed Medicaid changes to contract winners.
- Limited control to offer competitive wages to employees.
- Increasing drug use within community with novel types of drugs that healthcare providers might not be educated on.
- Increasing tuberculous cases in community due to clients not using good judgement.
- Younger generation being less responsible for their actions and the increase in their use of technology to "fix" everything.
- Limited access to health insurance for some of our residents.
- Third-party companies offering medical services "competing" against DOH-Walton and the Walton Community Health Center.
- Lack of affordable housing locally continues to be an increasing problem, which then affects the workforce, the ability to seek and obtain proper healthcare, and transportation.
- Infant formula marketing and use increases the health risks of babies and mothers and doctors promoting formula use instead of breastfeeding.
- Lack of specific community resources (ie. geriatric dental, urgent care centers, mental health treatment).
- No control over possible budget changes with limited funding opportunities for public health initiatives.
- Lack of community knowledge, education, communication and media resources within Walton County (ie "Walton County is a media black hole").
- Walton County residents are susceptible to potential deadly endemic diseases (ie. rabies, West Nile virus, etc.).
- With the increase in residents and tourist enjoying area beaches and recreational swimming locations during Spring and Summer, there is an increase likelihood of individuals potentially coming in contact with bacteria or algal blooms that cause illness (ie. Vibrio, enterococci, red tide, etc.).
- Increase use of telehealth could lead to gaps in services and potentially decrease in funding due to underutilization.
- Low health insurance coverage among residents.
- Turnover in specific staff could lead to instability and continuity concerns.
- Limited affordable house opportunities for the working family.
- Teenagers have "nothing to do" because there are limited area entertainment opportunities.
- Limitations on public transit and control over transportation.
- Decision-makers not always at the table for important public health discussions.
- Increasing homeless and aging population.
- Increasing number of parents seeking a religious exemption for vaccines.
- Extreme socioeconomic differences between North and South Walton County.




Appendix D


Alignment

Appendix D is a table that lists each Agency Strategic Plan objective number and name, as well as how it aligns with the current Community Health Improvement Plan (CHIP) Local Quality Improvement (QI) Plan, Agency Strategic Plan and State Health Improvement Plan (SHIP) and Agency Quality Improvement (QI) Plan.

#	Objective	2016 – 2018 CHIP	2017 – 2020 Local QI Plan	2016 – 2020 Agency SP	2017 – 2021 SHIP	Seven Agency Florida Health Performs Priorities
1.1.1A	By December 31, 2019, establish 15 new partners and enhance existing partnerships collaborating with health community partners to address the social determinants of health.	HE	N/A	1.1.2C	HE1	
1.1.2A	By December 31, 2020, the number of DOH-Walton employees who completed <i>Cultural Awareness: Introduction to Organizational Cultural Competence</i> and <i>Addressing Health Equity: A Public Health Essential</i> online trainings will increase from 0% (2018) to 50% (2020).	N/A	N/A	1.1.3A	N/A	
1.1.2B	By June 30, 2019, establish baseline data that shows the diversity of the current workforce to include race, ethnicity, gender, and educational attainment.	N/A	N/A	1.1.3C	N/A	
1.1.2C	By June 30, 2020, assess and promote the inclusion of the social determinants of health in 100% community health improvement plans.	HE	N/A	1.1.3D	HE2	

#	Objective	2016 – 2018 CHIP	2017 – 2020 Local QI Plan	2016 – 2020 Agency SP	2017 – 2021 SHIP	Seven Agency Florida Health Performs Priorities
1.1.2D	By June 30, 2021, increase the percentage of CHD family planning clients served who have documentation of race in their records from 93.1% (2017) to 95% (2021).	N/A	N/A	N/A	N/A	
1.1.2E	By June 30, 2019, assess current social determinant of health data collected from clients through Clinical Service and determine the three most prevalent health equity issues within client population.	N/A	N/A	N/A	N/A	
1.1.2F	By June 30, 2020, establish case management guidelines to address the three most prevalent health equity issues within client population.	N/A	N/A	N/A	N/A	
2.1.1A	By June 30, 2020, establish five partnerships for developing and implementing a community health improvement plan to address the identified gaps affecting older adults.	HE	N/A	N/A	HE3	
2.1.2A	By June 30, 2020, meet CDC requirements to move the Diabetes Prevention Program from pending status to preliminary recognition.	HB	N/A	N/A	HW1; HW2; CD1	N/A
2.1.2B	Annually, complete 100% of requirements for Healthiest Weight Florida reporting.	HB	N/A	2.1.1	HW1; HW2; CD1	N/A

#	Objective	2016 – 2018 CHIP	2017 – 2020 Local QI Plan	2016 – 2020 Agency SP	2017 – 2021 SHIP	Seven Agency Florida Health Performs Priorities
2.1.2C	By December 31, 2021, increase the percentage of Adult Comprehensive Care patients age 51 to 74 years old seen during the calendar year who had appropriate screening for colorectal cancer from 39% (2018) to 50% (2021).	N/A	N/A	2.1.3	CD1	N/A
2.1.3A	Annually, present on a mental health topic at one community outreach event or meeting.	SU&MH	N/A	N/A	BH3; BH4	N/A
2.1.4A	By December 31, 2019, conduct a car seat safety class quarterly targeted to new and expecting parents.	N/A	N/A	2.1.4; 1.1.1	MCH1; ISV1.2	
2.1.5A	By December 31, 2021, increase the percent of two-year-olds who are fully immunized from 85.9% (2017) to 90% (2021).	N/A	N/A	3.1.1A	IM1; IM2	
2.1.5B	By December 31, 2021, increase number of HPV vaccines administered annually from 658 (2018) to 800 (2021).	N/A	N/A	3.1.1	IM2	
2.1.5C	By December 31, 2019, increase number of hepatitis A vaccines administered annually from 970 (2018) to 1200 (2019).	N/A	N/A	N/A	N/A	N/A
2.1.6A	By December 31, 2021, ensure 50% clients receiving a HIV test are counselled on PrEP.	HE	N/A	2.1.5	ID2	N/A

#	Objective	2016 – 2018 CHIP	2017 – 2020 Local QI Plan	2016 – 2020 Agency SP	2017 – 2021 SHIP	Seven Agency Florida Health Performs Priorities
2.1.6B	By December 31, 2019, conduct a class quarterly at the Walton County Jail focusing on women's health and sexually transmitted disease prevention to link at-risk women to services.	HE	N/A	2.1.5	ID1; ID2	N/A
2.1.7A	By June 30, 2021, increase the percentage of CHD family planning clients who adopt an effective or higher method of birth control from 78.2% (2017) to 80% (2021).	N/A	N/A	N/A	N/A	N/A
3.1.1A	By December 31, 2021, establish seven partnerships to target prevention measures to reduce reported cases of enteric diseases.	N/A	N/A	N/A	N/A	N/A
3.1.2A	By December 31, 2020, establish and implement a program to guide public health preparedness efforts for the access and functional needs population.	N/A	N/A	N/A	N/A	N/A
3.1.2B	By December 31, 2021, have 100% of staff complete supplemental training for emergency response duties.	N/A	N/A	N/A	N/A	N/A
3.1.3A	Annually, increase the number of community employers who adopt a tobacco-free worksite policy by one in collaboration with the Walton County Prevention Coalition.	HB	N/A	3.1.4	CD1	

#	Objective	2016 – 2018 CHIP	2017 – 2020 Local QI Plan	2016 – 2020 Agency SP	2017 – 2021 SHIP	Seven Agency Florida Health Performs Priorities
3.1.4A	By December 31, 2019, work with community partners to establish two documented procedures to educate the community about the risks of the rabies virus.	HB	PP1	N/A	N/A	N/A
4.1.1A	By June 30, 2019, create and implement a workforce development plan that contains the necessary requirements from the Public Health Accreditation Board listed in Standards 8.1 and 8.2.	N/A	AP1	4.1.1A	N/A	N/A
4.1.1B	By June 30, 2019, define and implement a new employee orientation process to ensure comprehensive onboarding.	N/A	AP1	N/A	N/A	N/A
4.1.2A	By December 31, 2019, define and implement an internal communications process for coordinated dissemination of information.	N/A	N/A	N/A	N/A	N/A
4.1.2B	By December 31, 2019, define and implement an external communications process for coordinated dissemination of information.	N/A	N/A	N/A	N/A	N/A
4.1.3A	By March 2020, have 100% of programs submit a marketing budget allocation form for Fiscal Year 2020-2021.	N/A	N/A	N/A	N/A	N/A
4.1.4A	By December 2020, define internal process that streamlines applying for potential supplemental funding and grants.	N/A	N/A	N/A	N/A	N/A

#	Objective	2016 – 2018 CHIP	2017 – 2020 Local QI Plan	2016 – 2020 Agency SP	2017 – 2021 SHIP	Seven Agency Florida Health Performs Priorities
5.1.1A	By December 31, 2019, increase membership of the Walton Community Health Center Board of Directors from 9 to 12.	N/A	N/A	N/A	N/A	N/A
5.1.2A	By December 31, 2019, the Walton Community Health Center Board of Directors will establish a policy for credentialing in alignment with the HRSA guidelines.	N/A	N/A	N/A	N/A	N/A

Appendix E

Environmental Scan Resources

Appendix E is a list of the resources used to conduct the environmental scan that was done to develop this strategic plan in considering factors that influence the direction and goals of DOH-Walton.

1. [FLHealthCharts, Health Equity Profile, Walton County 2017](#)
2. [FLHealthCharts, County Health Status Summary, Walton County, 2017](#)
3. [Florida Department of Health, Agency Strategic Plan, 2016-2018](#)
4. Florida Department of Health, CHD Administrative Snapshot, Walton County, 2017
5. Florida Department of Health, CHD Administrative Snapshot, Walton County, 2018
6. [Florida Department of Health, CHD Performance Snapshot, Walton County, 2016](#)
7. [Florida Department of Health, CHD Performance Snapshot, Walton County, 2017](#)
8. Florida Department of Health in Walton County, Employee Satisfaction Survey Results, 2018
9. [Florida Department of Health in Walton County, Quality Improvement Plan, 2017-2020](#)
10. [Florida Department of Health in Walton County, Strategic Plan, 2016-2018](#)
11. [Florida State Health Improvement Plan, 2017-2021](#)
12. Robert Wood Johnson Foundation, County Health Rankings and Roadmaps, 2018
13. [Walton Community Health Improvement Plan, 2016-2019](#)
14. Walton Community Health Center, Key Performance Indicator Dashboard, 2017
15. [Walton County Community Health Needs Assessment, 2016](#)